

State of Washington Application for a Water Right

	For Eco	logy	Use	
F	ee Paid			

Please follow the attached instructions to avoid unnecessary delays.

Date ___

Section 1. APP	LICANT -	PERSON	N, ORGA	NIZATION, OR V	WATER	SYSTEM	
Name Walter	and Chr	istine	Cottre	Home Tel: (_	360) 2	67 - 1592	
Mailing Address /	80 G	1-8 R-8		Work Tel: () .	Samo	
City Graylan	St.	tate <u>WA</u> Zi	p+4 985	+ 9744 FAX: ()		
				ABOUT THE A			
☒ Same as abo	3 4						
Name 52)	ne			Home Tel: (_)		
Mailing Address				Work Tel: (_)		
City	St	tate Zi	p+4	+ FAX: ()		
Relationship to applic	ant						
Section 3. STA	TEMENT	OF INTE	NT				
The applicant request	s a nermit to us	se not more t	han 3	71.5	(⊠r ga	llons per minute or	
cubic feet per seco	nd) from a 🗌 s	surface water	source or 🗵	ground water source (check only	one) for the purpose	e(s)
of Irrigation,	heat a	nd Fros	f prote	ons.) NOTE: A tax parc	al number	ATTACH A "LEC	GAL"
sufficient.							noi
Estimate a maximum	annual quantit	y to be used	in acre-foot p	per year:			
Check if the w	ater use is prop	posed for a sh	ort-term proj	ject. Indicate the period	of time tha	at the water will be r	needed
From _		_ to/_	/				
Section 4 WA	TER SOUR	RCE					
Section 4. WA							
Section 4. WA							
If SURFACE WAT				If GROUNDWATER			
If SURFACE WAT Name the water so	ER urce and indi	cate if strea				well(s).	
If SURFACE WAT Name the water so lake, etc. If unnam	ER urce and indied, write "un	cate if strea				well(s).	
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream,"	TER urce and indied, write "union" etc.:	cate if strea		If GROUNDWATER A permit is desired for existing Survey 4 Sand poin		well(s).	
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion	TER urce and indied, write "union" etc.:	cate if strea		A permit is desired for existing Sur	forhole	well(s).	
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream,"	TER urce and indied, write "union" etc.:	cate if strea		A permit is desired for existing Sulfamed Sulfamed Sulfamed Size & depth of well	for well:		
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion	TER urce and indied, write "union" etc.:	cate if strea		A permit is desired to existing Sur 4 Sand point Size & depth of well depth of Sur	forhole twell: (s):		
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion	TER urce and indied, write "union" etc.:	cate if strea		A permit is desired for existing Sulfamed Sulfamed Sulfamed Size & depth of well	forhole twell: (s):		
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion Source flows into the control of the control LOCATION	TER urce and indied, write "under etc.: ons: name of body	cate if streamamed springly of water):	ng,"	A permit is desired in existing Sur 4 sand points	ior mphole twell: (s): mp &	3F+ 20F+	rest
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion Source flows into the control of the control LOCATION Enter the north-source.	TER urce and indiced, write "universe.: ons: name of body	cate if streamed springly of water):	es in feet fro	A permit is desired to existing Sur 4 Sand point Size & depth of well depth of Sur	ion or with	3FF 20FF	rest and AP
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion Source flows into the control of the control LOCATION Enter the north-source	TER urce and indiced, write "universe.: ons: name of body	cate if streamed springly of water):	es in feet fro	A permit is desired in existing Survival Survival Survival Survival Size & depth of well depth of Survival Sand points om the point of diversified West of	ion or with	3FF 20FF	n 27
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion Source flows into (LOCATION Enter the north-source section corner: 10	TER urce and indiced, write "universe" ons: name of body ath and east-verse.	cate if streamaned springry of water):	es in feet fro	A permit is desired in existing Survival Survival Survival Survival Size & depth of well depth of Survival Sand points om the point of diversified West of	ion or with	of source is platted, con	nplete
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion Source flows into (LOCATION Enter the north-source section corner: 10	TER urce and indiced, write "universe" ons: name of body ath and east-verse.	cate if streamamed springramed	es in feet from 15 75 (S	A permit is desired in existing Survival Survival Survival Survival Size & depth of well depth of Survival Sand points om the point of diversified West of	ion or with	of source is platted, combelow:	nplete
If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion of the source flows into the north-source section corner: 1000 1/4 of	TER urce and indiced, write "universe.: ons: name of body ath and east-vector Section	cate if streamaned springry of water): vest distance and the springry of water):	es in feet from \$575 (STATE Range (E/W)	A permit is desired in existing Survival Survival Survival Survival Size & depth of well depth of Survival A Pacific County A Pacific	ion or with	of source is platted, combelow:	nplete
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If SURFACE WAT Name the water so lake, etc. If unnam "unnamed stream," Number of diversion of the source flows into the control of the source flows into the source flows inth	TER urce and indiced, write "universe and indiced, write "universe and indiced, write "universe and indiced, write "universe and indiced	cate if streamand spring y of water): vest distance on the zno	es in feet from S 575 (S) Range (E/W) // WWA	A permit is desired in existing Survival Survival Survival Survival Size & depth of well depth of Survival A Pacific County A Pacific	ion or with South	of source is platted, combelow:	nplete

63.29768

Se	ction 5. GENERAL WATER SYSTEM INFORMATION		
A.	Name of system, if named:		10
В.	Briefly describe your proposed water system. (See instructions.) The Sumphole, approximately 40 x 250 Ft, is of water, with Sand points used to augme the water occasionally, Most of the water	used is re	oura Term
	to the sump by detakes through the bog A 20 kp pump supplies the water from the bog through a solid Set Sprinkler so	i the samp	
C.	Do you already have any water rights or claims associated with this property or sys PROVIDE DOCUMENTATION. Certificate # 62-260590 1.13.82 in name of L. David Devine	tem? YES priority da	□ NO
8727	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM IN ompleted for all domestic/public supply uses.)	FORMATION	
A.	Number of "connections" requested: Type of connection		
B.	(Homes, Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water County Health Department.	Apartment, Recreationa YES r systems are identified	□NO
Coı	nplete C. and D. only if the proposed water system will have fiftee	en or more connec	tions.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved.	☐ YES approved version of your	□ NO r plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current and	☐ YES approved version of your	□ NO r plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMA ompleted for all irrigation and agriculture uses.)	TION	
A.	Total number of acres to be irrigated:		
B.	List total number of acres for other specified agricultural uses:		
	Use Acres		
	Use Acres Use Acres		
C.	Total number of acres to be covered by this application:		
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).		
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:	☐ YES ☐ YES	☑ NO ☑ NO
E.	Farm uses: Stockwater - Total # of animals Animal Type Dairy - # Milking # Non-milking	_ (If dairy cattle, see be	elow)

Sec	ction 8. WATER STORAGE		
Will	you be using a dam, dike, or other structure to retain or store water?	□Y	ES 🛭 NO
point,	E: If you will be storing 10 acre-feet or more of water and/or if the water depth and some portion of the storage will be above grade, you must also apply for a voir permit application from the Department of Ecology.		
Sec	ction 9. DRIVING DIRECTIONS		
Provi	de detailed driving instructions to the project site. Driving South Highway 105 proceed to mile post 2: at read (Gould Rd) Turn right in drival Rd. Drive to end of drive way. when may be contacted at 1180 Gould when may be contacted at 1180 Gould	Grone Albert B. Turn lef veway at Ra)	rdeen 1255
Sec	ction 10. REQUIRED MAP		
A.	Attach a map of the project. (See instructions.)		
Sec A.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name of the owner(s):	(s) and address(es)	ES □ NO
В.	Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	∑ Y	ES □ NO
to promi	tify that the information above is true and accurate to the best of my knowled ocess my application, I grant staff from the Department of Ecology access to toring purposes. Even though I may have been assisted in the preparation of oyees of the Department of Ecology, all responsibility for the accuracy of the	o the site for inspection of the above application	n and n by the
	Salta D. Cottnell icant (or authorized representative) Date	lg 29, 199.	5
Land	owner for place of use (if same as applicant, write "same") Date		

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

That portion of the SE & of the SWKy of Section 29, Twsp 15 N, R 11 W of WM Pacific County, WA, which lies N of a line which is 643,57 ft N and parallel with the S line of said section 29 and lies Easterly of the center line of the North Cove Dramage District detal right of way.

We are returning your application for the following re	ason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	_ is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested a (date).	above and return your	application by
Ecology staff	Date	

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).